

POSITION	INITIALS	ID NC.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>RSS</i>		<i>1/18/01</i>
<b>FORMALITY REVIEW</b>	<i>M.H.</i>	<i>025</i>	<i>02-06-01</i>
<b>RESPONSE FORMALITY REVIEW</b>	<i>R.B.</i>	<i>1078</i>	<i>02/12/01</i>

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy

3C 6/12/01  
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